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# Reflections on Bystander Intervention: Barriers and Facilitators in Sexual Assault Helping

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**Reflections on Bystander Intervention: Barriers and Facilitators in Sexual Assault  
Helping**

**Madeline Whitcomb  
Victoria Banyard**

### **Abstract**

An innovation in the prevention of sexual assault and relationship violence on college campuses capitalizes on the motivation of bystanders to help stop the crime. Specifically, research on bystander helping shows factors that make it more or less likely that bystanders will take action: sharing a common social group with the victim, perceiving the severity of the situation, concerns about peer reactions and personal safety. While these studies illustrate the reasons bystanders do or do not step in, detailed descriptions of this helping process have yet to be examined. I content coded 20 in-depth qualitative interviews of student's personal experiences helping or not helping in a situation involving risk for sexual assault or relationship abuse. Results showed that the most common facilitators of helping are: knowing the victim, personal variables, situational variables, and safety nets. The most common barriers are lack of connection to the victim, negative personal consequences, and risk identification issues.

## **Reflections on Bystander Intervention: Barriers and Facilitators in Sexual Assault Helping**

*Sexual assault*, as defined by the United States Department of Justice, is “any type of sexual conduct or behavior that occurs without the explicit consent of the recipient. Falling under the definition of sexual assault are sexual activities such as forced sexual intercourse, forcible sodomy, child molestation, incest, fondling, or attempted rape” (USDJ, 2011, p. 1). Verbal coercion into intercourse is also on the continuum of the sexual assault crime. Most sexual assault victims are women and the rate is high – it is unanimously reported by many networks and censuses across the nation that *one in five* American women have been the victim of sexual assault, rape, or attempted rape. In a 2007 survey, the New Hampshire Coalition Against Domestic and Sexual Violence reported that approximately 23% of women in New Hampshire have been the victim of sexual assault (NHCADSV, 2011). This figure translates on college campuses across the nation and right here at the University of New Hampshire. UNH’s Sexual Harassment and Rape Prevention Program (SHARPP) reports that approximately one in five women report being sexually assaulted on campus by the time they graduate (SHARPP, 2011).

Sexual assault or rape victims not only suffer from long-term negative outcomes including posttraumatic stress disorder (PTSD), depression, substance abuse, thoughts of or attempts of suicide (Kilpatrick & Acierno, 2003), but research has confirmed that women who have previously been victims of rape or sexual assault are at an increased risk for subsequent victimization and women with a history of adolescent rape or attempted rape are almost *twice* as likely to experience a sexual assault in college than women with no previous history of sexual assault (Gidycz, 1993). In addition to the trauma of the initial impact and the increased risk of a second victimization, sexual

assault survivors who choose to pursue post-assault assistance through legal, medical, or mental health services can experience magnification of feelings of powerlessness, shame, and guilt if treated insensitively by these systems. “Post-assault help seeking can become a ‘second rape,’ a secondary victimization to the initial trauma” (Campbell, 2008, p. 703).

Evidently, the development of prevention efforts regarding sexual assault and rape are quite necessary and the importance of prevention programs for sexual assault and rape has resonated to federal lawmakers. The government has mandated that all campuses that receive federal funding must provide a sexual assault prevention program to students (Anderson et. al., 2005). Nation and colleagues (2003) identified that in order for prevention programs to be effective, they need to use multimodal methods and intervention settings, be provided in a sufficient dosage and at appropriate times, be driven by research theory and able to be empirically assessed, be socio-culturally relevant and be delivered through positive relationships between the participants and well trained instructors. Schools such as Columbia University, the University of Indiana and Harvard University have all used prevention strategies in their respective sexual assault prevention programs including student involvement, social marketing, targeting different levels of the ecological model, and emphasis on responsibility and accountability (ISCAPP, 2012; OSAPR, 2012; SAFER, 2012).

In a meta-analysis of over 100 sexual assault intervention strategies, Anderson and colleagues (2005) found that “those who participated in a sexual assault education program displayed greater factual knowledge about rape than those who did not” (p. 381). Although one in ten men on college campuses will experience a sexual assault (SHARPP, 2011), and both men and women are capable of perpetuating intimate partner

violence (Archer, 2000), much of the literature regarding sexual assault prevention approaches men as potential perpetrators and women as potential victims.

Marx and colleagues (2001) evaluated a risk-reduction program designed to prevent sexual assault re-victimization in 66 women with histories of sexual victimization. The program included informational and therapy sessions that emphasized risk recognition and response, as well as protective and assertive behaviors. Although this program yielded significant improvements in psychological adjustments of women who had been sexually victimized, the idea of targeting the victim as someone to end sexual violence somewhat adheres to victim blaming. One of the goals of the program included “altering dating behaviors associated with acquaintance rape (i.e., refusing to consume alcohol)” (Marx, 2001, p. 26). Perhaps victims should not be encouraged to change otherwise socially acceptable behaviors in order to protect themselves, as this may further alienate them.

Other prevention approaches aim to target potential perpetrators (who are closer to the root of the problem) as the main agent in stopping sexual assault. This approach is known as *primary prevention*, and the goal is to stop intimate partner violence before it has the chance to begin. Because men have been identified as the most common perpetrators of most sexual assault cases, which may be attributed to the dominant construction of masculinity (Flood, 2011), “true prevention can only take place by changing the behavior of men as the primary perpetrators of sexual assault; programs designed for women attempt to deter sexual assault by providing information that can reduce an individuals’ vulnerability” (Lonsway, et. al., 2009, p 20). Flood writes, “while some men are part of the problem, all men are part of the solution” (p. 372).

A study done by McDermott (2012) illustrates the need for primary prevention efforts targeting men. McDermott found that attachment anxiety (the strong desire for intimacy paired with fear of abandonment and doubts of self worth) and attachment avoidance (chronic discomfort with intimacy, distrust in others, and difficulty being vulnerable in relationships) created gender role stress in men. McDermott found that these aspects of attachment theory that collide with the rigidity of men's assigned gender roles lead to acceptance of intimate partner violence, which could easily lead to perpetuation of IPV, a form of violence that often co-occurs with sexual assault. This study shows how males' attitudes are a key factor in whether or not they will perpetuate violence in the future, thus, primary prevention that aims to change or build a positive attitude and norm regarding violence against women is imperative.

A public primary prevention program that has gotten positive publicity is "Men Can Stop Rape," a non-profit organization based in Washington D.C. that reaches out to different populations with different campaigns, including the "Men of Strength Club" for youth and the "Campus Men of Strength Club" for college men, along with a public awareness campaign titled "My Strength is Not for Hurting." The program's campaigns are based off of collaboration, not domination, and aim to build norms of masculinity that include sexual consent, respect, and nonviolence through a wide range of creative communication strategies (Men, 2011, p. 1). A study of the youth and college campus program showed that exposure to the prevention practices on a primary level leads to slightly more "respectful and equitable attitudes" in participants as well as "more favorable social climates" (Flood, 361) regarding violence against women and male domination.

Although “Men Can Stop Rape,” among other programs, has been successful in targeting sexual assault at its roots, Morrison and colleagues (2004) found that only 8% of rape education and prevention programs are designed specifically for men. Flood (2011) points out that “there has been very little evaluation of primary prevention strategies, including efforts of engaging men in violence prevention” (p. 361) and most post-intervention strategies follow up only weeks later and assess only attitudes, not actual behaviors. Perhaps a limitation of primary prevention and risk reduction strategies that has contributed to its’ difficulty in catching on with program implementers is that these strategies identify the problem of sexual assault as an *individual* issue. It is easy for any person to relay responsibility to others by confirming that *they themselves* will never perpetuate. However, in order to be most successful in ending sexual violence, the problem needs to be a movement and it needs to be recognized as a community, holistic issue where *everyone* has a role to play.

A new innovation in sexual assault and violence prevention focuses on the bystanders’ role in stopping this crime, where the bystander is a peer onlooker or person who is present, yet not directly involved, in the given situation. Bystanders, especially in a group, are peers that have the ability to collectively create and maintain an accepted social atmosphere that effortlessly influences or dictates the actions of others. Bystander intervention emphasizes an integrated method for stopping sexual assault through community involvement and it shifts the burden of sexual assault prevention away from the victims of the crime. Banyard’s (2011) review delineates the importance of active bystander behaviors in cases of sexual assault where there are peers in the position to intervene and diffuse the risky situation. She writes that “sexual assaults occur not only in



the presence of potential victims and motivated perpetrators but also in the absence of witnesses who are in a position to do something to help” (p. 216). However, there are four main theories backed by bystander literature that illustrate why peers commonly fail to intervene in situations involving risk for intimate partner violence or sexual assault. These theories are a) that the bystander and victim lack common social category membership, b) the situation is not perceived by the bystander as severe enough for intervention, c) the bystander is hesitant to step outside of peer norms to intervene out of fear of social isolation, and d) the bystander does not intervene out of fear of personal risk, specifically fear of being sanctioned by authority (Banyard, 2011).

### **Membership in a Social Category**

If a bystander were to witness a situation where there was a couple aggressively fighting outside of a party, one reason he/she may not intervene is because she/he does not feel socially connected to either individual and he does not want to intrude on two strangers’ conversation. Levine (2008) did a series of studies to replicate the original “bystander effect” study by Darley & Latané (1968), which initially solidified the social psychology phenomenon that the more bystanders there are in a situation where an individual needs help, the less likely it is for any one person to give that help due to the fact that individuals “pass off” responsibility. Levine’s studies found that increasing group size inhibited intervention in a street violence scenario with strangers, but encouraged intervention when the victim and bystanders were friends or shared membership in a social category. When gender was manipulated, the increasing group size of female bystanders led to greater helping of the female victim, but the increasing group size of male bystanders *did not* lead to greater helping of the female victim. The

findings of Levine's study indicate that the traditional bystander effect is most confirmed in situations where bystanders have no group-level psychological relationship to one another (i.e., gender).

A study by Kunstman and Plant (2008), which manipulated race as a function of bystander behavior, further delineates aversion towards "out groups" or groups with whom the bystander does not feel socially connected. White participants in this study were put in staged emergency situations. When the target of the emergency was black, he or she received help more slowly and less often than white targets, and white participants constructed the situation as less severe when the target was black. Thus, the bystander witnessing the aggressive fight between the couple outside the party may not intervene because of his gender or race. If the victim was female, or black, for example (given that the bystander is a white male) he may feel less inclined to help due to their lack of common ground, gender and race-wise.

McMahon's (2010) study regarding rape myth beliefs and bystander attitudes supports the idea that bystanders are more likely to help if they feel connected socially. She found that individuals who knew a victim of sexual violence were more likely and willing to help in a situation where there was a risk of sexual assault occurring to a new victim. This could be attributed to the fact that the individual had prior exposure to the ramifications of sexual assault, either through a friend or through one's own experience, and felt connected and thus responsible for helping to diffuse the new situation.

Hypothetically, if a bystander witnessing a fight outside of a party had previously had a friend disclose a rape or assault that started out as an argument after a party, he may feel

more connected and in-tune with the situation and more likely to step in and help diffuse it.

### **Severity**

Another important factor that has been shown to act as a hindrance in whether or not bystanders will step into a situation involving risk for sexual or relationship violence is individuals' perception of the severity of the situation at hand. A bystander witnessing a fight between a couple outside of a party may think the situation looks ambiguous. If there is no apparent physical threat of violence and the situation has not escalated to the point where one of the individuals involved has been physically hurt, the bystander may not be aroused enough to step in and help. The theory that severity is a key factor in determining whether or not to intervene in a situation is discussed in much of the literature regarding bystander intervention.

Saucier, Miller and Doucet (2005) did a meta-analysis of studies regarding participant responses to situations where victims needed help in a variety of scenarios. The authors found that victims received help more quickly and more often when the situation was rated more emergent. A specific study by Curphy et. al. (1998) assesses peer reporting intentions in 400 cadets in the U.S Air Force Academy in twelve scenarios that witnessed either a low-severity act or a high-severity act that broke the honor code of the Air Force Academy, which emphasizes the need to report lying, cheating, and stealing among fellow cadets. The low-severity scenario involved a cadet coming back to his room and his roommate offering him a can of coke and packages of cookies he got for "free" out of the vending machine. The high-severity scenario involved a cadet playing ten games of bowling with a fellow cadet, and when the cashier mistakenly charged the

fellow cadet for just six games, the fellow cadet went along with it and only paid for six. In the high-severity situations, the participants in the study reported stronger intended responses against transgressors, regardless of other measured factors in the study (friendliness/closeness to the transgressor or presence of other witnesses). Researchers also report “cadets were less inclined to turn in a violator concerning an offense considered relatively less severe. However, once the severity of the offense reached a certain point, most cadets indicated they would report the violator regardless of the degree of closeness between them” (Curphy, et. al., 1998, p. 37). Curphy and colleagues’ findings suggest that there is a certain threshold to bystander intervention and action, and in situations involving risks of sexual violence, the threshold seems to lie in whether or not the situation appears physically harmful.

In a meta-analysis by Fischer et. al. (2011), he points out that “the most noteworthy tendency in recent research is that the bystander effect often does not occur when the emergency is a dangerous one or when the bystanders are highly competent” (p. 520). Thus, Fischer found that the bystander effect (diffusion of responsibility) was generally weakened in situations involving physical risk or obvious danger to the participant. These types of situations induced a higher level of arousal, which lead to greater helping behaviors in the bystander. So, if a bystander witnessing a fight between the couple outside of a party was watching and all of the sudden the man involved in the fight threw a punch at the woman, he (the bystander) would be more inclined to intervene due to physical escalation and the new, tangible danger to the victim.

### Peer Norms

Evidently, failure to intervene in a situation that has not yet escalated physically but still contains risk for sexual or relationship abuse comes down to the bystanders' uneasiness about breaking the norm of silence and getting involved in someone else's business. Nelson (2011) writes that "bystander action can be seen as a 'troubling' mechanism in that it unsettles otherwise normalized situations, displacing dominant and taken for granted acts and utterances" (p. 264). A bystander witnessing a fight between the couple outside of a party may not get involved because his friends are ignoring the confrontation, so he does not want to appear isolated from his secure peer group.

There is a consensus among the literature that peer norms greatly influence, if not determine, actions of individuals, especially adolescents and young adults. Specifically, Potteat & Spanierman (2010) found that in a study of 395 American college students, peer norms predicted racist attitudes, words and actions above an individual's *own* ideological beliefs. If a bystander will be ostracized by acting against a peer norm by stepping into a situation to help where he or she is not directly involved, the bystander will most likely *not* intervene, not because they think the situation is under control, but out of fear of negative social response from peers. In other words, the bystander may not step in and help because of insecurities related to social interaction including embarrassment and fear of negative peer evaluation.

In a 2011 sociological study by Zoccola et. al., tendency to experience embarrassment was used as a variable in assessing whether participants would point out that a researcher had ink on her face. The participants were also told that the researcher had an interview following the experiment (so pointing out the flaw on the

experimenter's face would indeed be *helping* her). Participants whose personalities were rated higher in tendency to become embarrassed around peers (this, among other characteristics including agreeableness and self-perception that one is a helpful individual were assessed prior to the experiment) were less likely to help the experimenter by pointing out the flaw, which suggests that embarrassment (in front of peers) among individuals is a strong inhibitory factor in deciding whether or not to help in social situations.

In another similar study by Karakashian, Walter, Christopher & Lucas (2006), participants had the opportunity to help a female peer in a non-social or social situation. The non-social situation involved a confederate acting as a second participant in a study. When the confederate left the room with the researcher to complete a second phase of the study, she knocked over a set of floppy disks from a desk. The helping behavior in this situation would have been to pick up the disks while the confederate and researcher were out of the room. The social condition was the same, except instead of being alone to pick up the disks or not, there were two more confederates in the experimental room, acting as participants and thus creating a social situation for the real participant. Researchers found that regardless of the condition, the personal characteristic of the individual's fear of negative evaluation (FNE) by peers predicted helping behavior in that higher FNE scores negatively correlated with likeliness to engage in the helping behavior. This study, along with Zoccola's 2011 study, demonstrates the need for humans to remain accepted by peer groups.

Because racism is current, normalized, and still regarded as a "taboo" topic in our society, just as similar attitudes regarding sexual assault and male dominance are

embedded and normalized, many of the inhibiting factors of bystander intervention in a racist situation translate equally to the inhibiting factors of bystander intervention in a sexual assault situation relating to peer norms and the need to remain socially accepted in one's surroundings. In an analysis by Guerin (2003), he discusses how one of the main functions of racist talk and conversation between members of social groups is not to perpetuate racism (even though their words are indeed doing so) but to maintain secure social relationships among those in a common social circle. This argument suggests that the comfort in keeping one's own social status among friends and peers is an obstacle to bystander action. So, if the potential bystander will be criticized by his friends and thus isolated from his social circle for intervening in the situation where there is risk for sexual assault, he will fail to do so.

Scully and Rowe (2009), agree, as their reflections regarding bystander training in organizations and the workplace suggest that a major obstacle in intervention is fear of jeopardizing interpersonal relationships including friendships and professional relationships. Indeed, Hyers (2007) found that 37% of women did not speak up in a situation involving racism, heterosexism, and sexism in the workplace due to a wish to avoid the conflict. The need to remain at a comfort level in one's professional or social circle is highly apparent in the literature and can be looked at in regard to anti-helping bystander behaviors related to sexual assault.

It is common that men will casually talk about non-consenting sexual acts with women or other related dialogue. Many do not specifically engage in these actions or even have the intention of doing so, however men continue to engage in this banter to maintain a social status among their peers that delineates society's accepted frame of

masculinity. Those who engage in this behavior are simply working to secure their social standing among their peer group but even if these men are not directly meaning to do so, they are promoting a dangerous norm where helping in situations where there is a real risk for sexual assault is not socially accepted.

### **Personal Risk Factor**

The last identified theory of barriers of bystander intervention in situations involving risk of sexual assault is the bystander's own perceived personal risk. If a bystander witnessing a fight outside of a party is afraid that the aggravated man involved might turn on him and put him (the bystander) in danger, he may decide to ignore the situation. Aboud and Joong (2008) did a study assessing helping behaviors in children that witness bullying behaviors. The researchers found that many of the students did not help their peers out of fear that the bully might turn on them. Banyard (2011) also identified self-focused factors as obstacles in helping out in a situation involving risk for sexual assault. She found that the bystander's own perceived safety or concern regarding getting in trouble with authority was a huge barrier in helping behaviors. For example, if a potential bystander is at a party and sees a situation where a sexual assault may be at risk, yet the potential bystander is underage and has been drinking, he or she may be less likely to help in the given situation out of fear of being sanctioned (Banyard, 2011). Many potential bystanders also have a general mistrust of authority (i.e. police officers), especially on college campuses where underage alcohol consumption is highly prevalent. This may be another obstacle in bystander intervention.

Much of the literature relating to bystander behavior illustrates how social connection, severity of the situation, peer norms and peer acceptance, and personal risk



factor are areas that hinder helpful bystander behaviors in situations where there is risk for sexual assault.

### **Current Study**

Previous studies regarding bystander intervention in social situations have measured specific barriers in bystander behavior. The current study aims to provide textured, in-depth information and details of personal experiences where bystander action did or did not occur in a situation involving risk for sexual violence or relationship abuse. The use of qualitative data provided through interviews of participants in these social situations is intended to examine how UNH students' experiences in bystander helping fit with helping behaviors in the literature. Another aim is to evoke a greater understanding of the complex reasons why a bystander will help or will not help in these risky situations, and how bystanders reflect on these opportunities to help their peers. In addition, the current study may provide useful information as to how to tailor campus sexual assault prevention programs based on the actions, reasoning, and reflections of real participants.

### **Method**

#### **Participants**

This data came from a pool of participants that had either been a part of the "Bringing in the Bystander" prevention program during their freshman year, and/or had taken surveys detailing their bystander behavior and current knowledge of sexual assault during their first and second years on campus. These participants were initially part of a four year, CDC funded grant. The participants were currently in their senior or junior year of college, dependant on whether they were interviewed in the fall or spring

semester, respectively. 440 individuals made up the entire pool of program or survey participants. They were each contacted via email and asked to participate in a follow-up study, where they would be rewarded \$20 in cash (if their interview took place during the fall semester) or \$20 in the form of a gift card (if their interview took place during the spring semester). 53 participants responded to the email and agreed to be interviewed. Our sample of 20 interviews was extracted from the 53 total interviews. Of the 20 coded interviews, 8 participants were males and 12 participants were females. In addition, 11 participants made up the experimental group, meaning they received the Bringing in the Bystander prevention program during their first year at UNH, and 9 participants made up the control group, which means they only completed the research surveys regarding sexual violence and relationship abuse and were exposed to a community-wide social marketing campaign about sexual violence. Approval from the Institutional Review Board was obtained prior to participant recruitment and data collection for this study.

### **Measures**

The semi-structured qualitative interviews explored topics including the long-term impact of the prevention program and surveys, as well as the process of helping. Specifically, what facilitates or hinders students from stepping in and helping one another in a social atmosphere? The specific questions relating to general facilitators and barriers in helping behavior were: 1) Do you think UNH is a campus where people help one another? Why? 2) What kinds of helping most frequently happen here? 3) What kinds of helping are missing? 4) What make it hard for UNH students to help each other? 5) What encourages people to step in and help?

More personal questions were also asked, including 1) Tell me about a time where you helped a stranger at UNH. What generally happened? 2) Tell me about a time when you helped a friend at UNH. What generally happened? 3) Tell me about a time when you thought about doing something to help somebody but decided not to. Why didn't you intervene? 4) Tell me about a time when you witnessed sexual or relationship violence or had a friend tell you about an unwanted sexual experience or relationship violence. Did anything make helping difficult in this situation? 5) Were there consequences for stepping in? 6) What helped you decide to step in? 6) Tell me about a time when you saw a risk for unwanted sexual experience or relationship abuse where you decided not to step in. Why did you decide not to intervene?

Questions about the growth of individuals' helping behavior, thoughts, and knowledge on sexual assault and relationship abuse were also analyzed. Specific questions that addressed this topic were 1) How have your own thoughts related to sexual and relationship abuse changed over your years at UNH? Why do you think they have changed? 2) How have your own ideas and knowledge related to sexual and relationship abuse changed over your years at UNH? Why do you think they have changed? 3) How have your own behaviors related to sexual and relationship abuse changed over your years at UNH? Why do you think they have changed? 4) How was your helping behavior changed from freshman year until now? 5) Do you have a different amount of opportunity to help, now that you are older? 6) Now that perhaps you spend more time (than you did as an underclassman) in smaller groups of people where everyone knows each other, do you find it more difficult or easier to step in? 7) Do you think it makes it

easier or harder to step in now that you have close friends and you are no longer new to campus?

### **Procedure**

Following each interview, the participant was given a debriefing form. Each of the 20 interviews were recorded and transcribed. The interviews were then content analyzed for codes that described the helping process -- specifically, what facilitates and hinders UNH students from helping each other. Tutty & colleagues (1996) identified “first-level coding” as a process involving five tasks. The first task is to identify meaning units. The second is to assign category names to groups of similar meaning units. The third task is to assign codes to categories, and the fourth task is to reorganize and refine what has been coded. Tutty et. al. (1996) also notes that “knowing when to stop” is an important fifth task in first-level coding.

The first step in the current study was to have multiple research coders read the interviews a number of times to get a general sense of the qualitative data. Based on Tutty & colleagues’ (1996) guidelines to first-level coding, the next task was to identify meaning units in the text. This was done with three members of the research team. Each coder highlighted specific words and phrases that addressed barriers or facilitators in bystander helping in the first 5 interviews.

Second, the coders created categories that accurately represented each highlighted segment of text, or each meaning unit. The coders then reached consensus about which meaning unit fit into which category, across the 5 initial interviews. The members of the research team then agreed upon which “codes” or labels to assign the categories, keeping in mind what accurately represented the meanings of the highlighted segments of text.

These were identified as the first set of codes, based on Tutty & colleagues' (1996) guidelines.

The list of codes was then applied to the remaining 15 interviews by one member of the research team, who paid particular attention to the possible similarities and differences in the perception of the participants' words. Following the first round of coding, subcategories among the larger categories emerged and were identified as such. Finally, the main coder, in consultation with the principal investigator on the project, collectively created several higher order categories that accurately represented the categories and subcategories.

## **Results**

### **What are the facilitators of bystander behavior at UNH, particularly regarding situations involving risk for sexual violence and relationship abuse?**

The major categories that participants identified as facilitators in bystander helping were the necessity to help friends, individual qualities of the bystander, situational variables, and safety nets for helpers.

#### **Helping Friends**

Out of the 20 coded interviews, sixteen participants (80%) spoke of a genuine sense of loyalty to their friends that facilitated their helping behavior. Thirteen participants (65%) described a more obligatory or moral reason for helping their friends. The genuine/loyal category accounted for meaning units that described a *want* to help, as the obligatory/moral category accounted for meaning units that described a *need* to help. Although these two subcategories were coded separately, 8 out of the 20 participants (40%) noted both a moral obligation to help and a genuine desire to help their friends.

One participant described her genuine desire to help her friend after describing the following situation: *“We were just hanging out one night and there was this guy kind of being creepy towards her so we just went in her room to get away from him. She explained that specifically why this guy was making her uncomfortable was because a little while earlier someone else had raped her at a party and she was uncomfortable there. I felt really bad for her and I told her, you know, anything you want to talk about I’ll help you with. If you want to go after this guy, I’ll be there for you. I kept an eye on her after that. I wanted to make sure she was okay and this guy in her dorm wasn’t harassing her or anything.”* Another individual described his reason for helping his friend try to get out of an abusive relationship in the following quotation: *“When I hear about what happened to her, it’s kind of difficult to hear and it’s something that kind of breaks your heart.”* This delineates the heartfelt, genuine motivation in helping a friend who is experiencing relationship violence.

Other individuals described their motivation to help a friend who had disclosed a sexual assault as more of a moral obligation. One individual said: *“It was a party. They were kind of making out a little bit and then she decided that she wasn’t into it. Then he decided that he was going to force her... It happened a little while before she told me so I felt like there wasn’t a whole lot I could do other than be there for her. I could keep an eye on her but it had happened a while ago.”* When asked what helped her decide to step in, the individual said, *“I mean she’s my friend. I’m always going to have her back.”* Other participants described their decision to help a friend as *“sort of my automatic response”* or *“I don’t know... it seemed right.”* These examples demonstrate that the

UNH students who were interviewed were eager to help those close to them, whether it was out of genuine care or responsibility.

### **Bystander's Individual Qualities**

Specific aspects of the individual helper were also significant variables that encouraged bystander helping. Ten out of 20 people (50%) said that their older age/seniority on campus was a contributing factor in stepping in. When asked how her behavior relating to sexual or relationship abuse has changed over her years at UNH, one individual explained that her upperclassman status on campus would positively influence her helping behavior. *"I'm not going to the parties where this happens anymore just cause that's not – it's a different scene when you get older,"* she explains. *"But if I was at something like that and I saw it happen I would step in cause like, I'm not afraid of freshman guys."* Another individual agrees. *"I definitely would be more than willing (to help) than I used to be. I haven't been in many situations where that would come into play but I would be more than willing than I would freshman year... Being older comes with maturity completely."*

Additionally, 13 out of 20 people (65%) claimed that their involvement and comfort on campus (which has implications with age/year in school) positively influences their bystander behavior. One student expressed that it would be easier to intervene in a situation where he was more comfortable with the people and environment because *"I find it easier to talk to people I know better."* In one specific situation, a participant explained a scenario where her connection with a victim through involvement in a campus-related program helped facilitate her intervention: *"We were at a party my freshman year and there was a girl I had known from a pre-orientation service program*

*so it was before school had started. I knew her from that but I didn't know her very well. She was in one of the bedrooms and she was crying and she had some interaction with one of the brothers there or something... She was really upset about it and I remember we walked her home and talked to her about it."* Other individuals agreed that their involvement on campus encourages them to be an active bystander. *"If I have any difference in opportunity to help, it's not because I'm older. It's because I've joined more clubs – I'm an officer in several clubs. I'm in more of a position of power so I can help,"* one student remarked.

Four out of 20 participants (20%) acknowledged that their acquisition of a specific skill (knowing what exactly to do) is what helped facilitate them to step in as an active bystander. One student explains in the following segment how he used what he learned in the Bringing in the Bystander prevention program to de-escalate a situation. *"A girl was really a mess and this guy wasn't pressuring her necessarily, but, um, you could kind of tell she just wasn't having it. She was not interested in his intentions at all and he was just being really overbearing and I just looked and jumped in the situation and made it super awkward. And the guy kind of got mad at me and then took off. It was a situation where I had fun with it anyway. It was actually one month after this program actually happened, when I was a freshman...when I was still kind of thinking about that all the time, you know?"*

Another student explained a similar situation where she took what she learned from a formal source and applied it to a dangerous situation she came across. *"I was in a Women's Studies class and we had just been talking about domestic violence and my friends were walking kind of near Stoke and this uh... apparently her boyfriend pushed*



*her around. They were both pretty drunk but she seemed to not really know what was going on and he was pushing her towards Stoke. I stepped in and walked her back."*

These quotations exemplify that individual factors also come into play when deciding to step in. Age and seniority, involvement and comfort on campus, and knowledge of a specific skill or "what to do" all facilitated bystander behavior among UNH students in situations where sexual assault or relationship abuse was at risk.

### **Situational Variables**

Many situational variables, particularly tangible, visible evidence that the situation proposed a physical risk or was dangerous, also reflected facilitation in bystander helping. Eleven out of 20 (55%) of participants said that physical severity of the situation was what encouraged them to step in. One student claimed, regarding an argument that he witnessed between two individuals in a relationship, *"if it was getting violent, I know me and my three friends would have been in there, like, immediately."*

When asked what helps students step in, another participant said *"I think seeing someone hurt or distressed. I certainly would help someone. I wouldn't just watch someone get hurt and not say anything."* One student described a specific incident where her roommate and her roommates' boyfriend came home intoxicated after a party one night. They started yelling and screaming at each other, and then they started hitting each other. *"I put pants on, ran out, grabbed my RA and told him this is a big problem and I don't know what to do,"* she explained. When asked what prompted her to get help, she said, *"I was worried she (her roommate) would be badly hurt."*

In addition to stepping in when witnessing physical harm, 7 out of 20 participants (35%) said that they have or would step in to situations where a person was crying or in

hysterics. One student explained how one night *“all of the sudden I could hear yelling. Like severe yelling and then I heard like hysterical crying so I came out of my dorm room... you could just hear the couple fighting. And the guy was a guest and the girl lived in the dorm and he was just like saying horrible things and she was just like crying and crying and like, I went down to get my boyfriend, cause he’s older.”* Another student had a similar experience that triggered her helpful reaction. *“I was staying at my boyfriend’s dorm and in the middle of the night, at like one or two on the morning, I heard yelling. It was a couple coming back from a night out on a Saturday night and it sounded like they were fighting... and then I started to hear slamming against the wall. So I ran out to look out the door and there was the girl pushed up against the wall and the guy was leaning up against her (like this), and it was very obvious that there was something going on. So I was like, ‘are you okay?’ ‘Do you need help?’”*

In addition to the perpetration of physical harm or a situation where the victim is crying or visually upset, 4 out of 20 participants (20%) said that the victim’s body language was a facilitator in helping. One student described a situation where a peer was intensely fighting with her boyfriend. The student asked if the girl was okay. *“She was just like ‘I’m fine’ and that’s all she said. But she really didn’t make eye contact. So I just felt like it was really uncomfortable...like she didn’t mean it or something,”* she explained. Another participant said that one of her friends was talking to a man at a bar and he was getting a little too close, causing her friend to be uncomfortable. When asked what prompted her to step in and help her friend get out of the situation, she said, *“She’ll just give me a look. Like, ‘can we just leave?’”* These examples exhibit how physical

harm, signs of verbal distress, and the body language of the victim were all tangible factors that acted as facilitators in bystander helping among UNH students.

### **Bystander Safety Nets**

The last major category of facilitators in bystander helping identified in the interviews was safety nets for helpers. Bystanders want to know that they will be socially, physically, and legally supported when they intervene. Nine out of 20 participants (45%) mentioned that knowing they were supported and encouraged by their peers is what fostered their helping behavior. When asked what encourages people to step in at UNH, one student said, *“groups of friends and not just one.”* Another student agreed, adding, *“there are some things you can’t do without anyone backing you.”* One student said that what makes them want to step in to help someone to a risky situation is *“Seeing other people around you doing it. If you see someone else help someone, you’re all the sudden thinking, oh man, I should have helped that person before them, or, I wanna help someone too because I forgot how good it is to do that sort of thing.”* This act of “paying the deed forward” was mentioned in 15% of the interviews. One student agreed, saying that what encourages them to step in and help at UNH is *“seeing more and more people do it, just on a day to day basis – like a pay-it-forward type thing. Like if you see it, you’re gonna want to do it more.”*

Five out of 20 participants in the study, or 25%, said that the knowledge and guarantee that they were not going to get in trouble by the police or with law enforcement is an encouraging factor in stepping in to help. One student said *“Knowing some sort of Good-Samaritan act or law – knowing that it can’t come back up on them if they try to help someone... really does a lot of good.”* Another student agreed, saying what helps

people step in is if *“they can help without getting in trouble themselves. I think a lot of people are very willing to help if they don’t see themselves getting in trouble in the outcome.”* *“Knowing more about your rights and legal situations”* is what another student regarded as what would help people step in. Additionally, the guarantee of physical safety (coming away from the situations un-harmed) was a motivator in helping behavior among 5% of the interviewed students. UNH students wanted to know that when they choose to go out of their way and step in, they will not suffer any negative consequences.

**What are the barriers of bystander behavior at UNH, particularly regarding situations involving risk for sexual violence and relationship abuse?**

One broad reason individuals declared they would avoid helping in a situation with the possible risk of sexual assault or relationship abuse is general conflict avoidance. Ten out of the 20 participants (50%) said that they would not help because they would rather stay uninvolved. Others were more definitive in their reasons to avoid the conflict. Three more specific categories of barriers in bystander helping were: a lack of personal connection to those involved, the anticipation of a negative personal consequence, or an issue with identifying whether the situation imposes a risk.

**Lack of Personal Connection**

Out of the 20 coded interviews, 15 participants (75%) said that they would not step in if they did not know the victim or perpetrator involved in the situation. One individual explains *“it was my boyfriend’s friends that were fighting and I thought it was kind of...oh... ‘she shouldn’t be calling him names or other things that aren’t healthy in a relationship’ and I wasn’t really sure how to go about it ‘cause they aren’t my friends.”*

More specifically, 5 out of 20 (25%) people said they would not step in if they did not know the perpetrator. One individual that witnessed a situation where there was risk for sexual assault or relationship abuse said she was *“scared to be involved because I didn’t know what he was going to do.”* Others had difficulty identifying the perpetrator after the incident. One student explained a situation where a man ran up behind a woman walking in front of her and grabbed her inappropriately. The bystander did not intervene in the situation any further because *“I didn’t know the guy at all,”* she said. *“I was like, sorry, I’d help you but he was wearing jeans and a sweater.”* Five out of 20 people (25%) said they would not step in if they did not know the victim. One student explained that it is more difficult to help strangers because *“it’s harder to know if they’re uncomfortable or not.”*

One student explained a situation where a couple was fighting outside a bar on campus and the girl slapped her boyfriend. When asked why he didn’t intervene at that point, he said *“Mostly because I didn’t know them and the guy looked like he was trying to get a good handle on the situation.”* This alludes to the idea that the bystander must feel a strong enough connection to the victim in order to help them personally. If that connection is not felt, the bystander passes responsibility to other people.

Six out of 20 participants (30%) said that they did not help in a situation because others were in control, or they thought others *could* be in control. These “others” could include the victim’s friends or other bystanders. One individual described a situation where she got the victim’s friends to help her instead of helping the victim on her own. *“I remember that there was a specific fraternity where some guys were definitely taking advantage of the situation with this girl and she was very, very intoxicated... I think I*

*ended up going and finding her friends and having...telling them because girlfriends usually look out for each other.*” In another situation, an individual said he did not help a peer that was very intoxicated at a bar on campus because it was *“his own fault that he got that drunk”* and *“he had his own friends there to help him.”* These quotations show that the lack of a connection between the bystander and the victim, perpetrator, or both can lead to the bystander opting out of the opportunity to help, or passing the responsibility to others, which supports Darley & Latané’s (1968) original theory of the Bystander Effect.

### **Negative Personal Consequences**

Negative personal consequences were also a major barrier in bystander helping. Thirteen out of 20 individuals (65%) claimed that fear of negative social consequences is what stopped them from intervening in a risky situation. Many students were worried about the aftermath of helping between their friends. One student said that it is harder to intervene in situations where friends are involved because *“that’s something that carries into personal relationships after the fact.”* One student explained a situation where he was living with a couple for a summer and the woman he was living with was being verbally and emotionally abused by her partner. The student said that he did not intervene because *“if definitely would have made living there this past summer really awkward if I had brought it up.”* Other students agreed that they did not intervene out of the need to keep the peace. When asked about reasons why UNH students do not step in, one student said, *“not wanting to feel weird...like how people would judge you for it.”* Others talked about running the risk of being *“shut down”* or judged by friends.

Eight out of 20 participants (40%) said that a barrier to stepping in was concern for their own physical safety. One student didn't intervene in a fight *"because I didn't wanna get punched."* Another student claimed that a barrier to helping would be if the perpetrator were a *"really threatening person."*

Additionally, 5 out of 20 participants (25%) said that they would not intervene if legal consequences were imminent. One student explained a barrier in helping at UNH is *"that people are more afraid of getting in trouble themselves than helping others."* There seems to be a general sense of distrust for law enforcement within the University. Another student said, *"The police aren't looking out for us. They are instead only looking out for who they can get in trouble."* Another student agreed, claiming *"I don't wanna associate myself with people doing that, especially if they get the police involved. I know I've been underage and I don't wanna get in trouble."* Another student talked about an experience where he had the opportunity to help a peer but decided not to. *"We can't really help this kid cause we're drinking too,"* he said. *"So we're all gonna get screwed."* These quotations exemplify that fear of negative social, physical, and legal residual effects restrained UNH students' helping behaviors in their past experiences.

### **Identification Issues**

The final category that acted as a barrier in bystander helping in situations involving risk for sexual assault or relationship abuse was issues with identifying the problem – in other words, identifying whether the situation was one that called for intervention. For 7 out of 20 participants (35%), intervention did not occur because the situation did not appear severe enough. Mostly, participants reported witnessing verbal arguments. One student reported witnessing a verbal argument between two individuals

in a relationship, but she did not intervene because it *“didn’t seem like there was any real danger.”* One student had a similar experience. He explained that *“of course anything can always escalate, but it (the argument) didn’t seem like it was too heated. It was just a verbal disagreement.”* In these cases, bystanders were unsure of the threshold of what was considered abuse or not.

Another issue of identification that acted as a barrier arose when participants in the study talked about risky situations involving two people in a relationship. Six out of 20 (30%) participants did not step into situations where sexual violence or relationship abuse was at risk because the people involved either were in a relationship or knew each other well. Many participants minimized the risk of the situation by rationalizing that *“there are disagreements in any relationship”* or that it is *“the couple’s own problem.”* One participant described a scenario where she witnessed a couple in a heated fight in a parking lot on campus. *“You kind of wish they could have done that in a private spot so you wouldn’t have to feel uncomfortable,”* she said. This delineates an identification issue because the individual thinks the fight was okay because it was between a couple, but not okay because it was in public.

In another interview, an individual describes a situation where despite the fact that the victims were distressed, he did not step in because they were “friends” with the perpetrators. *“The guys were pretty drunk and they were saying things to the girls that made them uncomfortable. Saying things that they wanted done,”* he describes. *“They knew each other well enough where I didn’t think it was going to get to the point where it was dangerous or where it was going to escalate, so I didn’t do much about it.”* Issues of identification were classified as barriers in bystander behavior for UNH students. For



some, the issue lay in identifying *what* behaviors constituted sexual assault. For others, the issue was in identifying abuse within intimate relationships or friendships.

**How do individual facilitators and barriers in bystander helping collate to describe the UNH students' process of helping?**

Although the specific facilitators and barriers in bystander intervention are important and useful to look at individually, another benefit of the current study is the ability to conceptualize the detailed qualitative data as a whole to see the many factors that build the *process* a bystander goes through in the midst of his or her decision to help.

One student explained how his decision to help would be based on whether the victim was a friend or stranger, coupled with whether the situation would put him in personal physical danger. He explains, *"If it's a friend I immediately jump in. If it's a stranger I kind of look at the situation and determine if it's safe for me to intervene or not."* Another student delineates a similar scenario, explaining how he would help a friend regardless of the danger it would put him in, but he would be less apt to help a stranger if personal danger was present. He states, *"I kinda have just a really strong trust with the majority of my friends and I also don't want them to be harmed so I would put myself out there for a friend but on a stranger, I would really, I would be a little hesitant only in the sense that I would wanna scan the situation to make sure that I would not be put in harm."*

In another story of helping, severity (visible physical fighting or verbal fighting) was the first "red flag" that initially prompted a response from bystanders. One individual explained a situation where her roommate and boyfriend came home after a night of partying and were intensely fighting. When asked what made helping difficult, she

explained *“it was difficult because it wasn’t clear what was happening at first. I’d never been in a situation like that before. I just didn’t know what to do so I was just kind of freaking out.”* When asked what encouraged her to step in instead of staying in bed at that point, she said, *“I was worried she would be badly hurt.”* This individual’s story delineates her initial lack of skill and anxiety regarding not knowing what to do to help, followed by her concern based on the severity of the situation, followed by a genuine concern for the victim’s safety that overrode her previous hesitancy to help.

In another scenario, a bystander explained that she did not want to intervene on her own because the perpetrator *“was very drunk and quite large. He was the sports player type.”* Therefore, this bystander got the help of her RA, who further dealt with the situation. This quotation shows that severity of the situation may initiate the helping, but fear of personal safety may stop it, or lead one to pass off responsibility to another.

In another student’s experience, she was going up an elevator to go home to her apartment on campus and the doors opened on a floor where there was a girl crying in the fetal position on the floor and, who the student assumed to be the girl’s boyfriend, was standing over her. The individual suspected there may be something risky going on, but chose not to proceed with helping. She describes her experience as such: *“He wasn’t rowdy or anything and he looked really calm. And he was like, ‘She’s fine. She’s fine.’ And I was standing there and I was like, ‘are you sure? Are you sure?’ But because the elevator was closing and I thought that she got up, I was like, ‘alright, I’ll let it go.’ I was just tired. I just didn’t want to deal with it.”* This individual’s experience delineates the initial concern stemmed from the girl crying, clearly upset, on the floor. After making an

initial decision to help (by asking if the girl was okay), factors that hindered further helping were the girl's boyfriend coaxing her away, as well as her own tiredness.

In a situation previously mentioned, one student chose not to intervene in a situation where relationship abuse was occurring within an intimate relationship. At first, he regarded the emotional abuse (bullying and putting down) as *"their own problem,"* indicating an issue with the identification of contexts in which abuse occurs, but then, as the behavior continued, he explained that *"this is a really regular thing and it made me uncomfortable to live with them."* He also noted *"how they acted around each other was inappropriate."* When asked if his distress in his living situation or the persistence of the emotional abuse encouraged him to do anything to help, he said, *"No, I didn't (help). I didn't know them super well even though I was living with them"* and *"it (intervening) would have made living there this past summer really awkward if I had brought it up."* Although an identification problem initially put off the process of deciding whether or not to intervene, the main factors that hindered this individual's process of helping were 1) not knowing the two people well enough to feel comfortable stepping in and 2) the anticipated awkwardness, resentment, or other negative consequences of his living situation after intervention.

### **Discussion**

Previous research regarding bystander intervention emphasizes social category membership (Levine, 2008; Kuntsman & Plant, 2005; McMahon, 2010), severity of the situation (Saucier, Miller, & Doucet, 2005; Curphy, 1998; Fischer, et. al., 2011), peer norms (Zoccola, et. al., 2011; Karakashian, et. al., 2006; Guerin, 2003; Scully & Rowe, 2009) and personal risk factors (Aboud & Joong, 2008; Banyard, 2011) as variables that

influence whether or not a person will intervene in a situation where another individual needs help. These studies, among others, led us to inquire about UNH students' experiences helping or not helping in situations where there a risk for sexual assault or relationship abuse, a crime that is all too prevalent on this campus (SHARPP, 2011). We examined the following research questions: 1) What are the facilitators of bystander behavior at UNH, particularly regarding situations involving risk for sexual violence and relationship abuse? 2) What are the barriers of bystander behavior at UNH, particularly regarding situations involving risk for sexual violence and relationship abuse? And 3) How do individual facilitators and barriers in bystander helping collate to describe UNH students' process of helping?

Our findings reveal that the responsibility of helping a friend, whether due to genuine concern or moral obligation, is a major factor in whether a bystander will intervene in a situation involving risk for sexual assault or relationship abuse. UNH students are more than willing to help their friends, but helping behaviors become less prevalent when dealing with victims or perpetrators that are strangers to them. If the bystander and those involved in the situation lack a common social identity, such as belonging to a similar club or attendance in the same class, the bystander is more likely to pass off responsibility to the victim's friends or other bystanders. Our finding supports and extends Kuntsman & Plant's (2008) finding that white bystanders are less likely to help black bystanders due to incongruent racial identity, and Levine's (2008) findings that they bystander effect is confirmed in situations where there is no group level psychological relationship between the bystander and victim.

Personal skill, or knowing what to do in a situation where there is risk for sexual assault or relationship abuse is also a variable that facilitates bystander helping in UNH students. This finding coincides with McMahon's (2010) finding that individuals who knew a victim that had been raped and therefore had previous knowledge on how to handle the situation were more apt to step in and help. Our research, as well as McMahon's indicates that knowledge of the crime, which may come from previous experience, facilitates bystander helping.

Additionally, our findings regarding severity as a factor in facilitating bystander behavior at UNH coincide with Fischer and colleagues' (2011) meta-analysis, which concluded that the bystander effect, or diffusion of responsibility, is weakened in situations involving detectable physical danger. UNH students were eager to step in to help in situations where there was visible physical harm or risk of physical harm in the stories told throughout the interviews.

However, lack of severity in situations also acted as a barrier in active bystander behavior at UNH. Our findings regarding lack of severity coincide with Saucier, Miller & Doucet's (2005) study, where victims received help more quickly and more often when bystanders perceived the situation as more emergent. Curphy et. al.'s (1998) study on military honesty practices revealed that cadets were less likely to turn in an offender of a military violation that was considered less severe. This corresponds with our findings that bystanders at UNH were less likely to intervene in a situation that they found less severe, even if it was interpreted as wrong (such as a verbal argument). The assessment of severity in the current study and in previous research indicates that the presence of physical harm or danger is necessary for bystander action to occur in many instances.

We found that assurance of social safety acted as a facilitator and fear of negative social consequences acted as a barrier in bystander helping for UNH students. Our findings corresponded with studies by Zoccola et. al. (2011), and Karakashian et. al. (2006), where conclusions were drawn that embarrassment among peers or fear of negative social evaluation, respectively, are strong inhibitory factors in deciding whether or not to help in the midst of a social situation. UNH students, and other individuals in general, tend to stick to what everyone else is doing out of fear of disrupting the social atmosphere and therefore labeling themselves as an outcast.

Scully & Rowe (2009) found that fear of jeopardizing personal relationships is a major obstacle in bystander intervention. This rang true for many UNH students who did not intervene because of the perceived negative implications intervention would have on their friendships. Perhaps these students and the perpetrators of a sexual assault in these stories were good friends. In those cases, the bystander would need to make the decision whether stepping in and helping the victim is worth jeopardizing the relationship with the perpetrator. That decision may be easier for some and harder for others.

Other findings in our interviews suggest that UNH students do not step in out of fear that the aggressor, or perpetrator in the situation, may turn on them out of anger. This finding is supported by Aboud & Joong (2008) who found that children in their study did not intervene in situations where bullying was occurring out of fear that the bully may in turn victimize *them*. In addition, legal risk, specifically concerns with underage drinking and getting arrested, was a major concern and barrier in bystander behavior among interviewed UNH students. This barrier is supported by Banyard (2011), who identified

that individuals fail to intervene in situations involving risk for sexual assault out of fear or being sanctioned.

To reiterate a point by Fischer et. al. (2011) previously addressed, “the bystander effect often does not occur when the emergency is *dangerous* or where bystanders are highly *competent*” (520). Our research suggests that there is a problem among UNH students in identifying what is regarded as dangerous – that is, which situations constitute risks for sexual assault and relationship abuse. UNH students, and, to expand the discussion, bystanders in other studies, do not generally step in if the situation is below their personal threshold of severity (i.e. verbal arguments that have not yet escalated but may be suspected to, or verbal and emotional abuse). Therefore, if UNH students (and other bystanders outside of the University) were able to identify the signals of risk in a verbal argument, they would be more likely to take immediate personal responsibility to help.

Fischer & colleagues (2011) also allude to the point that if bystanders were competent in the issue, they would understand not only what relationship abuse looks like but *where it happens*. If bystanders understood that relationship abuse and sexual assault most commonly occur in the context of intimate relationships, bystanders may be less likely to rationalize a couple fighting outside a bar on campus, or (out of the context of the current study) a wife verbally abusing her husband in a grocery store. Therefore, it is important that sexual assault prevention programs teach about the scope of the problem (that sexual assault and relationship abuse most commonly occur within intimate relationships or friendships) and teach skills that allow the bystander to comfortably and

safely intervene in a situation where the people involved know each other or are in a relationship.

Our findings regarding the collation of individual facilitators and barriers in helping illustrate that bystanders weigh the risks of personal physical harm when deciding whether or not to help a stranger. Similarly, UNH students are less likely to be hesitant to help if the victim is their friend. In addition, our findings regarding the process of helping indicate that severity and genuine concern for the victim over ride initial hesitancy to help due to lack of skills, but personal physical danger leads to passing off the responsibility to help or seeking further help from others (from an RA or the police). Other UNH students weighed their own personal concerns (such as tiredness) with their concern for others that may be in need. Others experienced an issue with identifying abuse or risks for abuse, followed by noticing the severity of the abuse, followed by backing away from stepping in out of anticipation of negative social consequences.

It may be helpful for future prevention efforts to use the stories of UNH students' processes of helping to look at the big picture. Prevention efforts may structure their messages around the many complex situations UNH students may come across, and capitalize on how to deal with the situation when other factors, such as personal tiredness or negative social consequences, are at hand.

### **Limitations and Implications**

We recognize that this study has a number of limitations, as the general purpose was for exploration of experiences among UNH students that may provide suggestions or inspire directions for future research. Our findings were based on a small sample of 20 individuals within a University of close to 12,000 undergraduates. It would be wrong to



assume that these 20 individuals represent the ideas, behaviors and experiences of all 12,000 students. However, our hope was to provide an insightful glimpse into a portion of the students' experiences. A second limitation of the study is that all participants had previous exposure to information regarding bystander intervention, either through the Bringing in the Bystander program, the surveys, or the community-wide social media campaign. Our qualitative data may have looked different had we interviewed students with no previous exposure to bystander intervention strategies.

Our data may have also been improved or been more textured and informative if we conducted follow-up interviews after our codes were adapted that addressed further experiences in facilitating or avoiding bystander intervention. Questions we could have asked in second-round interviews may have been tailored to individuals' specific experiences and could have included 1) What was going through your mind when you first heard the yelling? 2) What made you decide to get your RA to help, instead of taking action yourself? 3) Were you in a rush when you decided to pass by a risky situation? Tailored follow-up interviews may be a direction for future research to gain further insight into individuals' experiences with helping their peers.

Although extension of this study could further delineate and help define the practices of helping among UNH students, our hope is that we provided some basic yet interesting insights. Understanding factors both individually and as components of unique processes in bystander decision making shows support that the continuation of sexual assault and relationship abuse prevention programming on college campuses is necessary.

Twenty percent of the interviewed students identified that having a skill, or knowing what to do, was a facilitator in bystander behavior. Thirty-five percent of

students in our sample thought that a situation was not severe enough for intervention. Twenty-five percent of students in our sample did not intervene in a situation where they were afraid of legal ramifications, and thirty percent of interviewed students did not intervene in a risky situation where the two people involved were in a relationship. These findings support the need for continuation of prevention programs, specifically *Bringing in the Bystander*, the sexual assault prevention program offered to first-year students at UNH.

This program uses bystander action research as the main theory behind efforts to stop sexual assaults on campus. The program addresses participants by increasing their knowledge of the crime – what behaviors constitute sexual assault, the scope or context in which the abuse most commonly happens, where and how to report abuse, as well as how to identify early warning signs of sexual assault and how to safely intervene. The program also provides students with knowledge of the justice system, so bystanders know their rights during and after intervention – that for the purposes of justice, arresting an underage drinker is not a priority in the wake of a sexual assault case (Bringing, 2008)

Because having a skill facilitated bystander behavior in the experiences discussed in our interviews, programs that teach these skills, such as *Bringing in the Bystander* at UNH, are important. In addition, because identification issues regarding the context and constitution of abuse, as well as fear of legal ramifications hinder bystander helping, knowledge of which behaviors are considered sexual assault, which types of relationships abuse generally happens in, as well as the legal policies in place, are important to spread among campus. *Bringing in the Bystander* aims to do this (Bringing, 2008).

Our findings also have important implications for future prevention efforts. Tangible severity, whether it is physical danger, victims crying or in hysterics, or victim's uncomfortable body language, all facilitated helping in a large percentage of interviewed students (55%, 35%, and 20%, respectively). Tangible severity is also what initiated the intervention in many of the stories that describe the process of helping. The qualitative data lets us see factors that impede helping on a secondary level, which bystander prevention programs could focus on in the future. These factors include dealing with individual time constraints or tiredness. Because a high percentage of individuals (75%) said they would not step in if they did not know the victim, or stepped in for the main reason that the victim was his or her friend (80% of individuals), perhaps future bystander prevention programs could capitalize on techniques that teach individuals to help strangers without risking any negative consequences, especially social consequences, which was a concern for 65% of interviewed students.

Because our findings indicate that 65% of students (all upperclassmen) felt that their age and comfort on campus lent them more power to intervene in situations involving risk for sexual assault, especially among younger students that were less intimidating, perhaps future prevention efforts could target upperclassmen as models, or facilitators in stopping sexual assault among underclassmen, who are at heightened risk for unwanted sexual experience (Kimble, et. al., 2008). If successful, this would create a social atmosphere among the University where it was normal and accepted to intervene as a bystander. Stepping in to stop risky situations would no longer be a social risk for students. Frequently seeing upperclassmen step in to help underclassmen that may be

strangers could also promote the idea of “paying it forward,” a factor that 15% of interviewed individuals identified as a facilitator in bystander helping.

To comply with our findings that 25% of UNH students would not step in out of expected legal consequences, it would be helpful for future prevention programming, or freshman orientation programs, to emphasize a Good Samaritan law within the University. This would encourage students to get their peers help from police, residential assistants, and other authority figures regardless of their own illegal personal circumstances, like being underage. A Good Samaritan law would not only serve situations involving risk for sexual assault or relationship abuse, but any other kind of situation where a peer may need help, such as in the case of a physical injury.

### **Conclusion**

Our findings revealed that the most common facilitators in bystander helping are: knowing the victim, personal variables, situational variables, and safety nets, and the most common barriers in sexual assault helping are: lack of connection to the victim, negative personal consequences, and risk identification issues. As researchers and prevention program implementers work to create and improve sexual assault prevention programs, especially those on college campuses, they may seek to further understand these factors through the qualitative personal explanations that the current study provides. We hope that this paper provides useful information to help develop prevention efforts that are key to ending sexual assault and relationship violence on college campuses.

### Works Cited

- Abbey, A. (2002). Alcohol-related sexual assault: A common problem among college students. *Journal of Studies on Alcohol, 14*, 118-128.
- Aboud, F.E., & Joong, A. (2008). Intergroup name calling and conditions for creating assertive bystanders. In S. R. Levy & M. Killen (Eds.), *Intergroup attitudes and relations in childhood through adulthood* (pp. 249-260). New York: Oxford University Press.
- Anderson, L.A.; Whitson, S.C. (2005). Sexual assault education programs: A meta-analytic examination of their effectiveness. *Psychology of Women Quarterly, (29)*, 374-388.
- Archer, J. (2000). Sex differences in aggression between heterosexual partners: A meta-analytic review. *Psychological Bulletin, 126*, 651-680.
- Banyard, V. L. (2011). Who will help prevent sexual violence: Creating an ecological model of bystander intervention. *Psychology of Violence, 1*(3), 216-229.
- Bringing in the Bystander: Overview. (2008). Prevention innovations. Retrieved from <http://www.unh.edu/preventioninnovations/index.cfm?ID=BCCEA40C-A3AC-0FFD-47D118DA9EFDF176>
- Broach, J. (2004). Exploring the alcohol sexual assault link: Pathways from alcohol to assault. *Life and health library*. Retrieved from [http://findarticles.com/p/articles/mi\\_go2545/is\\_2\\_48/ai\\_n9731425/?tag=content;col1](http://findarticles.com/p/articles/mi_go2545/is_2_48/ai_n9731425/?tag=content;col1)
- Campbell, R. (2008). The psychological impact of rape victims' experiences with the legal, medical, and mental health systems. *The American Psychologist, 70*, 702-717.

- Curphy, G. J., Gibson, F. W., Macomber, G., Calhoun, C. J., Wilbanks, L. A., Burger, M. J. (1998). Situational factors affecting peer reporting intentions at the U.S. air force academy: A scenario-based investigation. *Military Psychology, 10*(1), 27-43.
- Darley, J., & Latané, B. (1968). Group inhibition of bystander intervention in emergencies. *Journal of Personality and Social Psychology, 10*, 215-221.
- Fischer, P., Krueger, J. I., Greitemeyer, T., Vogrincic, C., Kastenmuller, A., Frey, D. Heene, M., Wicher, M., Kainbacher, M. (2011). The bystander-effect: A meta-analytic review on bystander intervention in dangerous and non-dangerous emergencies. *Psychological Bulletin, 137*(4), 517-537.
- Flood, M. (2011). Involving men in efforts to end violence against women. *Men and Masculinities, 14*(3). 358-377.
- Gidycz, C., Coble, C., Latham, L., & Layman, M. (1993). Sexual assault experience in adulthood and prior victimization experiences. *Psychology of Women Quarterly, 17*, 151-168.
- Guerin, B. (2003). Combating prejudice and racism: New interventions from a functional analysis of racist language. *Journal of Community and Applied Social Psychology, 13*(1), 29-45.
- Harrington, N. T. & Leitenberg, H. (1994). Relationship between alcohol consumption and victim behaviors immediately preceding sexual aggression by an acquaintance. *Viol. Vict, 9*. 315-324.
- Hyers, L. (2010). Resisting prejudice every day: Exploring women's assertive responses

- to anti-Black racism, anti-Semitism, heterosexism, and sexism. *Sex Roles*, 56(1), 1-12.
- ICSAPP. (2012). Indiana campus sexual assault primary prevention program. Retrieved from <http://www.purdue.edu/incsapp/index.shtml>
- Kalmakis, K. (2009). Cycle of sexual assault and women's alcohol misuse. *Journal of the American Academy of Nurse Practitioners*, 22, 661-667.
- Karakashian, L.M., Walter, M. I, Christopher, A. N., & Lucas, T. (2006). Fear of negative evaluation affects helping behavior: The bystander effect revisited. *North American Journal of Psychology*, 8, 13-32.
- Kilpatrick, D. G., & Acierno, R. (2003). Mental health needs of crime victims: Epidemiology and outcomes. *Journal of Traumatic Stress*, 16, 119-132.
- Kimble, M.; Neacsiu, A. D.; Flack, W. F.; Horner, J. (2008). Risk of unwanted sex for college women: Evidence for a red zone. *Journal of American College Health*, 57(3). 331-337.
- Koss, M. P. (1988). Hidden rape: Sexual aggression and victimization in a national sample of students in higher education. *Rape and Sexual Assault*, 2. 3-25.
- Kuntsman, J. W., & Plant, E. A. (2008). Racing to help: Racial bias in high emergency helping situations. *Journal of Personality and Social Psychology*, 95(6), 1499-1510.
- Levine, M. & Crowther, S. (2008). The responsive bystander: How social group membership and group size can encourage as well as inhibit bystander intervention. *Journal of Personality and Social Psychology*. (95)6. 1429-1439.

- Lonsway, K. A.; et. al. (2009). Rape prevention and risk reduction: Review of the research literature for practitioners. *National Online Resource Center on Violence Against Women*. 1-20.
- McDermott, R. C., & Lopez, F. G. (2012). College men's intimate partner violence attitudes: Contributions of adult attachment and gender role stress. *Journal of Counseling Psychology*. Advance Online Publication. 1-10.
- McMahon, S. (2010). Rape myth beliefs and bystander attitudes among incoming college students. *Journal of American College Health*, 59, 3–11.
- Marx, B. P., Calhoun, K. S., Wilson, A. E., & Meyerson, L. A. (2001). Sexual revictimization prevention: An outcome evaluation. *Journal of Counseling and Clinical Psychology*, 69(1), 25-32.
- Men Can Stop Rape: Creating Cultures Free from Violence. (2011). What we do. Retrieved from <http://www.mencanstoprape.org/>
- Morgan D.L. (1993) Qualitative content analysis: a guide to paths not taken. *Qualitative Health Research*, 3, 112–121.
- Morrison, et. al. An evidence-based review of sexual assault preventive intervention programs. *Washington, DC: National Institute of Justice*. 1-63.
- Nation, M. et al. (2003). What works in prevention: Principles of effective prevention. *American Psychologist*, 58. 449-456.
- Nelson, J.K., Dunn, K.M., Paradies, Y. (2011). Bystander anti-racism: A review of the literature. *Analyses of Social Issues and Public Policy*, 11(1). 263-284.
- NHCDVA. (2011). Research and statistics. Retrieved from <http://www.nhcadsv.org/research-statistics.cfm>



- OSAPR. (2012). Office of sexual assault prevention and response. Retrieved from <http://www.fas.harvard.edu/~osapr/index.html>
- programs. *American Psychologist*, 58(6-7), 482-490.
- Potteat, V.P., & Spanierman, L.B. (2010). Do the ideological beliefs of peers predict the prejudiced attitudes of other individuals in the group? *Group Processes & Intergroup Relations*, 13(4), 495-514.
- SAFER. (2012). Students active for ending rape. Retrieved from <http://www.safercampus.org>
- Saucier, D. A., Miller, C. T., & Doucet, N. (2005). Differences in helping whites and blacks: A meta-analytic answer. *Personality and Social Psychology Review*, 9(1), 2-16.
- Scully, M., & Rowe, M. Bystander training within organizations. *Journal of the International Ombudsman Association*, 2(1), 1-9.
- SHARPP. (2011). Sexual assault. Retrieved from [http://www.unh.edu/sharpp/sexual\\_assault.html](http://www.unh.edu/sharpp/sexual_assault.html)
- Swartout, K. (2012). The company they keep: How peer networks influence male sexual aggression. *Psychology of Violence*. 1-15.
- Tutty, L. M., Rothery, M., Grinell, R. M. (1996). *Qualitative Research for Social Workers: Phases, Steps and Tasks*. Needham Heights, MA: Allyn and Bacon.
- United States Department of Justice. (2011). Sexual assault. Retrieved from <http://www.ovw.usdoj.gov/sexassault.htm>
- Zoccola, P.; Green, M.; Karoutsos, E.; Katona, S.; Sabini, J. (2011). The embarrassed bystander: Embarrassability and the inhibition of helping, *Personality and*

*Individual Differences.* 51. 925-929.